

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
<b>FEES DETERMINATION</b>			
<b>O.I.P.E. CLASSIFIER</b>		49	1/31/01
<b>FORMALITY REVIEW</b>	TN	E.O.	2/12/01
<b>RESPONSE FORMALITY REVIEW</b>	HT	712	06-95-01

INDEX OF CLAIMS

✓	Rejected	N	Non-elected
=	Allowed	I	Interference
- (Through numeral)	Canceled	A	Appeal
÷	Restricted	O	Objected

**Best Available Copy**

Claim	Final	Original	Date
1	Q	5	1/4/01
2	✓	1	1/25/01
3			7/2/01
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44	✓	✓	
45	✓		
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49	✓	✓	
50	✓	✓	

Claim	Final	Original	Date
51	✓	✓	1/2/01
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If more than 150 claims or 10 actions  
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L2  
1/17/01